



Docket No.: 025444.1132 US01  
(PATENT)

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:  
Melton B. Affrime, et al

Application No.: 09/760,588

Group Art Unit: 1614

Filed: January 16, 2001

Examiner: C. Delacroix-Muirheir

For: TREATING ALLERGIC AND  
INFLAMMATORY CONDITIONS

**TRANSMITTAL LETTER**

Box RCE  
Commissioner for Patents  
Washington, DC 20231

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced  
Patent Application:

1. Fee Transmittal;
2. Request for Continued Examination (RCE) Transmittal;
3. Response under 37 C.F.R. § 1.116;
4. Declaration for Utility Patent Application (37 CFR 1.63);
5. Request to Correct Inventorship;
6. Statement under 37 CFR § 1.148(a)(2);
7. Information Disclosure Statement;
8. Form PTO-1449;

9. 111 cited documents;

10. Check No. 312275 for \$1,680.00 to cover:

\$750.00 RCE fee;

\$930.00 three months extension of time fee; and

11. Return receipt postcard.

The Commissioner is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or any paper hereafter filed in this application by this firm) to our Deposit Account 50-0740, under Docket No. 025444.01132-US01. A duplicate copy of this paper is enclosed.

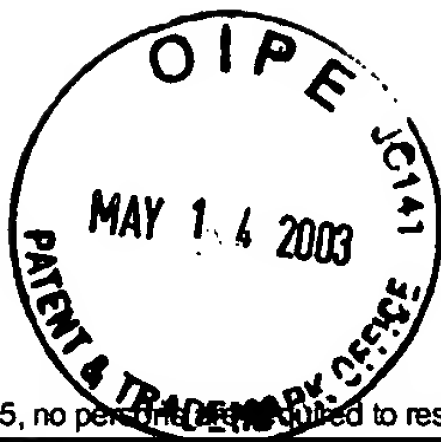
It is not believed that extensions of time fees are required beyond those that may otherwise be provided for in documents accompanying this paper. However, if additional extensions of time are necessary to prevent abandonment of this application, then such extensions of time are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required therefor are hereby authorized to be charged to our Deposit Account No. 50-0740.

Dated: May 14, 2003

Respectfully submitted,

By   
Anthony S. Yoo

Registration No.: 45,540  
COVINGTON & BURLING  
1201 Pennsylvania Avenue, N.W.  
Washington, DC 20004-2401  
(202) 662-6000



PTO/SB/30 (10-01)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**REQUEST  
FOR  
CONTINUED EXAMINATION (RCE)  
TRANSMITTAL**Address to:  
Commissioner for Patents  
Box RCE  
Washington, DC 20231

Application Number	09/760,588-Conf. #4299
Filing Date	January 16, 2001
First Named Inventor	Melton B. Affrime
Group Art Unit	1614
Examiner Name	C. Delacroix-Muirhei
Attorney Docket No.	025444.1132-US01

#10  
JRP  
6/6/03**This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.**

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

**1. Submission required under 37 CFR 1.114**

- a. ☐ Previously submitted
- i. ☐ Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on \_\_\_\_\_  
(Any unentered amendment(s) referred to above will be entered).
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_
- iii. ☐ Other \_\_\_\_\_
- b. ☒ Enclosed
- i. ☒ Amendment/Reply
- ii. ☒ Affidavit(s)/Declaration(s)
- iii. ☒ Information Disclosure Statement (IDS)
- iv. ☒ Other Request to Correct Inventorship and Statement under 37 C.F.R. § 1.48(a)(2)

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- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)
- b. ☐ Other \_\_\_\_\_

**3. Fees** The RCE fee under 37 CFR 1.17 (e) is required by 37 CFR 1.114 when the RCE is filed.

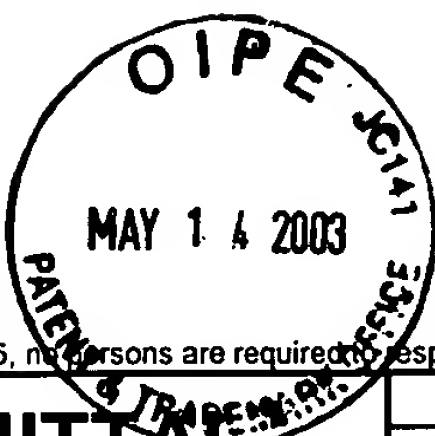
- a. ☐ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. \_\_\_\_\_
- i. ☒ RCE fee required under 37 CFR 1.17(e)
- ii. ☒ Extension of time fee (37 CFR 1.136 and 1.17)
- iii. ☐ Other \_\_\_\_\_
- b. ☒ Check in the amount of \$ 1,680.00 enclosed
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

Name (Print/Type)	Anthony S. Yoo	Registration No. (Attorney/Agent)	45,540
Signature		Date	May 14, 2003

05/15/2003 SSESHE1 00000080 09760588

01 FC:1801  
02 FC:1253750.00 OP  
930.00 OP



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FEE TRANSMITTAL for FY 2003		Compleat if Known																																															
Patent fees are subject to annual revision.		Application Number	09/760,588-Conf. #4299																																														
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<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	025444.1132-US01																																														
TOTAL AMOUNT OF PAYMENT (\$)		1,680.00																																															
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																															
<div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None</div><div><input type="checkbox"/> Deposit Account</div></div> <div style="margin-top: 5px;">Deposit Account Number: 50-0740</div> <div style="margin-top: 5px;">Deposit Account Name: Covington &amp; Burling</div> <div style="margin-top: 5px;">The Commissioner is hereby authorized to: (check all that apply)</div> <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Charge fee(s) indicated below</div><div><input checked="" type="checkbox"/> Credit any overpayments</div></div> <div style="margin-top: 5px;"><input type="checkbox"/> Charge any additional fee(s) during the pendency of this application</div> <div style="margin-top: 5px;"><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</div>		3. ADDITIONAL FEES																																															
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<table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"><thead><tr><th colspan="2">Large Entity</th><th colspan="2">Small Entity</th><th rowspan="2">Fee Description</th><th rowspan="2">Fee Paid</th></tr><tr><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th></tr></thead><tbody><tr><td>1001</td><td>750</td><td>2001</td><td>375</td><td>Utility filing fee</td><td></td></tr><tr><td>1002</td><td>330</td><td>2002</td><td>165</td><td>Design filing fee</td><td></td></tr><tr><td>1003</td><td>520</td><td>2003</td><td>260</td><td>Plant filing fee</td><td></td></tr><tr><td>1004</td><td>750</td><td>2004</td><td>375</td><td>Reissue filing fee</td><td></td></tr><tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="5" style="text-align: right; font-weight: bold;">SUBTOTAL (1)</td><td style="text-align: right;">0.00</td></tr></tbody></table>		Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1001	750	2001	375	Utility filing fee		1002	330	2002	165	Design filing fee		1003	520	2003	260	Plant filing fee		1004	750	2004	375	Reissue filing fee		1005	160	2005	80	Provisional filing fee		SUBTOTAL (1)					0.00		
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<div style="display: flex; justify-content: space-between;"><div>Total Claims: <input type="text"/> -20** = <input type="text"/> x <input type="text"/></div><div>Independent Claims: <input type="text"/> -3** = <input type="text"/> x <input type="text"/></div><div>Multiple Dependent: <input type="text"/></div></div> <div style="margin-top: 5px;"><table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"><thead><tr><th colspan="2">Large Entity</th><th colspan="2">Small Entity</th><th rowspan="2">Fee Description</th><th rowspan="2">Fee Paid</th></tr><tr><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th></tr></thead><tbody><tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr><tr><td>1201</td><td>84</td><td>2201</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>1203</td><td>280</td><td>2203</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr><tr><td>1204</td><td>84</td><td>2204</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr><tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="5" style="text-align: right; font-weight: bold;">SUBTOTAL (2)</td><td style="text-align: right;">0.00</td></tr></tbody></table></div> <div style="margin-top: 5px; font-size: 0.7em;">**or number previously paid, if greater; For Reissues, see above</div>		Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1202	18	2202	9	Claims in excess of 20		1201	84	2201	42	Independent claims in excess of 3		1203	280	2203	140	Multiple dependent claim, if not paid		1204	84	2204	42	** Reissue independent claims over original patent		1205	18	2205	9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)					0.00		
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SUBMITTED BY		Complete (if applicable)																																															
Name (Print/Type)	Anthony S. Yoo	Registration No. (Attorney/Agent)	45,540																																														
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